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APPLICANTS

Donato Forlenza, Hopewell Junction, NY;
 Franco Motika, Hopewell Junction, NY;
 Phillip J. Nigh, Williston, VT;

** CONTINUING DATA ***** *None* *7/20/2005*

** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 07/22/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>7/20/05</i>	STATE OR COUNTRY NY	SHEETS DRAWING 3	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examined Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

Verified and Acknowledged

ADDRESS
 24241
 IBM MICROELECTRONICS
 INTELLECTUAL PROPERTY LAW
 1000 RIVER STREET
 972 E
 ESSEX JUNCTION, VT
 05452

TITLE
 Functional pattern logic diagnostic method

FILING FEE RECEIVED 908	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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